



Child safe child friendly **Risk management framework**

Not knowing is not an excuse

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Contents

Feedback

At UnitingCare we welcome your feedback. Please share your thoughts on this Child Safe, Child Friendly Risk Management Framework, or related policies, procedures or practice

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Review and version control					
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“All of us have a responsibility – individually and collectively – for ensuring the safety and wellbeing of every child...”

Message from our CEO

At UnitingCare, all of us have a responsibility – individually and collectively – for ensuring the safety and wellbeing of every child associated with our organisation.

We uphold this responsibility by placing the safety of any child above all individual and organisational interests, reporting our concerns and recognising that regardless of role or work place, not knowing is not an excuse.

I truly appreciate the commitment and vigilance our staff and volunteers have shown in implementing safe environments for children across UnitingCare’s Family and Disability Services, Hospitals, Blue Care and Australian Regional and Remote Community Services business units.

Since the implementation of the revised Child Safe, Child Friendly Risk Management Framework three years ago, we have further increased and strengthened child safe practices in line with the standards identified by the Royal Commission into Institutional Responses to Child Sexual Abuse and the Uniting Church National Child Safe Policy Framework 2017.

This framework extends on the 2015 and 2018 frameworks by incorporating our 2030 operating structure and branding. Through our continuous improvement processes we will ensure our framework and procedures demonstrate best practice. We will respond to legislative change and learn from inquiries, research about child safety and measures to prevent abuse.

Our staff know the standards to which we hold them for their interactions with children and the consequences of any breaches – that’s why we have reinforced that **not knowing is not an excuse** throughout the framework and supporting documents.

This framework guides your child safe practice as an employee or volunteer of UnitingCare, and I ask you to apply it on a daily basis – regardless of your role or work place.

If you are concerned about the safety of a child, I want you to do something about it – talk with your manager or supervisor immediately. If you notice small things, behaviours that make you uneasy or procedures not being followed – talk with your manager or supervisor, or seek advice from the Child Safe Contact Officer. Don’t wait for proof. It is critical that all concerns are raised so that they can be addressed. And, if a child speaks out, always listen and act on what they have to say. You will always be supported when you act in the interests of a child.

Thank you for your dedication to providing a friendly, safe environment for the children in contact with our services.

Together – living our values – UnitingCare will honour our commitment to being a child safe, child friendly organisation.

Craig Barke
Chief Executive Officer



Policy

Policy Statement

UnitingCare is committed to being a child safe, child friendly (CSCF) organisation and will:

- provide welcoming, safe and nurturing services for all children
- implement measures to prevent child abuse and neglect within its services
- appropriately and immediately address child abuse and neglect if it does occur.

The safety of any child will be placed above the interests of any other individual or the organisation.

How do we balance child safe and child friendly practice?

The breadth of services offered by UnitingCare means that a blanket approach in child safe, child friendly practice is not appropriate. Services and roles range from those where there is direct service delivery to some of the state's most vulnerable children, through to those where there is no contact with children or information about children. Some risk may be specific to a location, activity or program.

This framework focuses on the safety of children in our care or in contact with our organisation. However, as the title suggests, having a child friendly organisation is important too. We want to ensure that the safety of children impacts as little as possible on our ability to interact with children in a natural and supportive way. It is especially relevant to key areas of our business which require us to deliberately develop trusting relationships with children and others around them in order to provide the best care possible.

Our work may require us to seek out time alone with children to assist them to address difficulties in their lives and to help them to develop healthy relationships with themselves and others. It may require us to have difficult and personal conversations with children or to help them address sexualised behaviours. It may require us to be involved in very personal physical care. These areas of our business are also the highest risk areas for very vulnerable children to be harmed. Thus we will always be aiming to strike the balance between child safe and child friendly care.

Our Values

UnitingCare is a values-based organisation and our values are applied to the care and safety of children as follows:



Compassion

Demonstrating understanding and empathy for others, to bring holistic care, hope and inspiration.



Respect

Accepting and honouring diversity, uniqueness and the contribution of others.



Justice

Focussing on the needs of people we serve and to work for a fair, just and sustainable society.



Working together

Appreciating the richness of individual contributions, partnerships and teamwork.



Leading through learning

Encouraging innovation and supporting learning.

Framework

The child safe, child friendly risk management framework is endorsed by the Board.

This framework sets out:

- The overall policy guiding the safety of children in contact with UnitingCare and subsidiary entities and how we aim to provide child friendly services in this context
- How we will understand and mitigate risk across our organisation to determine which CSCF actions are relevant to each role/service
- The CSCF actions for implementation across UnitingCare according to risk, which will underpin business unit/function procedure and practice.

In reading this framework, you should be familiar with the appendices and refer to them at the appropriate points.

This framework, along with service stream/support service procedures:

- meets requirements of the *Working with Children (Risk Management and Screening) Act 2000 (Qld)* which outlines screening requirements for child-related employment in Queensland and the need to have a risk management strategy for 'regulated businesses', defined under the legislation
- meets requirements of the *Care and Protection of Children Act (NT) 2007* which outlines screening requirements for child-related employment in the Northern Territory
- addresses the Child Safe Standards identified by the Royal Commission into Institutional Responses to Child Sexual Abuse (Royal Commission)
- aligns with the Uniting Church in Australia National Child Safe Policy Framework.

In reading this framework, you should be familiar with the appendices and refer to them at the appropriate points



Our contact with children

A child is any person under the age of 18 years.

UnitingCare provides services directly to children and our staff and volunteers also come into contact with children indirectly through the provision of services to other people. Service contact is made with children using various means, such as face-to-face, on the telephone and online.

Child-related services include: residential out-of-home care; early childhood education and care; counselling; foster and kinship care placement and support; family support programs; paediatric health services; child and youth mental health services; crisis accommodation; drug and alcohol services and disability services.

Indirect contact can take place where children are in the care or residence of others receiving our services, for example, aged care in the community, or as visitors to a residential aged care or retirement facility.

UnitingCare staff, volunteers and foster and kinship carers provide services to children. Contractors, third party providers and students on placement may also come into contact with children. Children who are clients can also be in direct contact with other child clients of similar or different ages. Children in foster and kinship care are in contact with the carer and can also be in contact with other adults and children in the carer's household as residents or visitors. Children and young people can be employees or volunteers or students on placement in our organisation.

These varying levels of contact with children affect how this framework will be implemented across the organisation. Staff and volunteers will receive information and training relevant to their contact with children. Business units and functions will take responsibility for ensuring that CSCF risk exposure assessment is undertaken and measures to mitigate identified risks are implemented.

Who does this framework apply to?

This framework applies:

- to all UnitingCare Board members, executives, staff, volunteers, carers, contractors, consultants and researchers;
- in relation to all children currently in receipt of, or in contact with, UnitingCare services; and
- where there is suspicion of, or an allegation is made against, a current Board member, executive, member of staff, volunteer, carer, contractor, client, consultants and researchers.

For matters where the child is no longer in receipt of, or in contact with, UnitingCare services and the person the allegation is made against is no longer associated with the organisation, the Complaints of Past Child Abuse or Neglect Policy and Procedure will apply.

The varying levels of contact with children across the organisation will affect how this framework is implemented and CSCF risk exposure assessment for each business unit/function will determine how this occurs. It is expected that executives and managers will be familiar with this framework and know how it applies to their staff. We believe that not knowing about this framework and its requirements is not an excuse. Staff, volunteers, carers and people associated with UnitingCare in **child-related roles** must understand this framework and apply it in their day-to-day duties, while those in roles with limited or no contact with children should be aware of the framework, even if it does not relate directly to their role.

Foster and kinship care

Foster and kinship carers have a particular relationship with the organisation and Department of Children, Youth Justice and Multicultural Affairs (Department of Children). This is a complex relationship in which carers are supported by staff employed within UnitingCare to maintain each child's placement in out-of-home care. Foster and kinship carers enter into a specific agreement with Child Safety as approved carers and are bound by the conditions of that agreement, including undertaking prescribed training. They are therefore not specifically bound by this framework. However, the principles of child safety in this framework are consistent with the legislation that underpins the agreements. UnitingCare supports foster and kinship carers to maintain CSCF environments.

Services related to foster and kinship care will be subject to CSCF risk exposure assessment and CSCF actions in this framework, implemented as required to mitigate risks.

Children we support

A number of services provided by UnitingCare have child clients in close contact with other child clients. In many cases, these children have had traumatic life experiences, such as abuse – including sexual. Their understanding of relationships and behaviour can be impacted by their previous experiences. Where child clients are in contact with each other, we will ensure that CSCF risk exposure assessment and mitigation takes into account the experiences each child brings with them and provide an environment which is focused on safety for all clients. In responding to children with harmful behaviours we will act in accordance with this framework, and also with a therapeutic approach to assist the child to address the behaviour and its causes.

Other people

For people in contact with UnitingCare's services who do not fall into these categories, the relevant business unit/function will determine the extent of the application of this framework to the person, in accordance with the person's role.



Actions

1. Our organisational culture

We commit to:

- embedding through all levels of UnitingCare, a culture of individual and collective responsibility for the safety and wellbeing of children in contact with our organisation that puts the safety of any child above the interests of any other individual or the organisation in making decisions about children under this framework
- ensuring policies and procedures uphold our organisational values and commitment to CSCF practice
- maintaining the belief that not knowing about this framework and its requirements is not an excuse when it comes to child safety risks
- empowering children, families, staff and volunteers to report disclosures, allegations, suspicions or incidents of child abuse and neglect
- establishing a Child Safety Steering Committee with senior representatives from across the organisation to form a network of champions tasked with oversight of this framework
- keeping child safety on our agenda and providing information to help people, including children, families, staff and volunteers, recognise child abuse and neglect and risk to child safety and make it easy to report concerns

- recognising children’s diverse circumstances, providing a culturally safe environment, and responding effectively to all children, including Aboriginal and Torres Strait Islander children, children with disability and children from culturally and linguistically diverse backgrounds
- acknowledging that families have the primary responsibility for the upbringing and development of their children and providing children and families with opportunities to participate in decision-making, where appropriate
- encouraging peer friendships to help children and young people feel safe and supported
- providing families and communities with information about our operations and governance
- inviting children and families to provide feedback on our policies, procedures and practices.

The safety of any child will be placed above the interests of any other individual or the organisation.

We empower children, families, staff and volunteers to report disclosures, allegations and suspicions, or incidents of child abuse and neglect

1.1 Individual and collective responsibility

1.1.1 Business units, functions and all individuals to whom this framework applies shall adopt an individual and collective responsibility approach to the safety of children. People must take responsibility for their own behaviour as well as supporting others to feel comfortable and safe raising concerns about behaviour they observe or become aware of. Staff and volunteers are expected to act and make decisions in the interests of protecting a child where their safety is at risk. While this framework establishes organisational requirements and processes to keep children safe, it does not remove the need for individuals to act to address risks or concerns when they arise.

Rationale

1.1.2 A culture of individual and collective responsibility is critical in preventing and addressing child abuse and neglect. Such a culture is a deterrent for would-be offenders and sends a clear message that abuse of children will not be tolerated at UnitingCare.

1.2 Raising awareness and keeping child safety on our agenda

1.2.1 UnitingCare will ensure that awareness is raised about child safety and that the safety of children remains an ongoing high priority across the organisation. We will implement a range of communication activities to ensure this happens.

We will:

- empower children and families to know what their rights are and what to do if a child does not feel safe in interactions with UnitingCare by developing easy-to-use reference resources and displaying information about our approach to child safety in areas where children and families in contact with our services will see it
- ensure widespread awareness of this framework, with all staff and volunteers to be made aware of the requirements and principles of the framework as implemented in procedures and practice
- take opportunities to celebrate children
- ensure staff and volunteers have easy-to-use resources to support child safe practice and decision-making under this framework and display information about our approach to child safety in areas where staff and volunteers will regularly see it.

Rationale

1.2.2 Wide dissemination of our CSCF approach that is simple to understand and easily accessible further embeds the culture we aim to create and ensures children and families are empowered to know what to expect and to report any concerns.

1.2.3 If awareness about child safety is high, vigilance in implementing prevention strategies is consistent and it is understood that concerning behaviour will be reported and acted on, safety for children in contact with UnitingCare will be increased.

1.3 UnitingCare Child Safety Steering Committee

1.3.1 A Child Safety Steering Committee will be established. The role of the Child Safety Steering Committee is to:

- Provide oversight of this framework
- Champion child safe, child friendly practice across UnitingCare
- Promote a culture within UnitingCare that prioritises the safety and wellbeing of children
- Monitor implementation of the framework across service streams/ support services
- Develop strategies to ensure framework commitments and actions are maintained over time, including mechanisms for obtaining data to demonstrate compliance
- Identify and address systemic issues arising from examination of specific incidents or child safety concerns
- Lead annual reviews of this framework and related policies and procedures
- Provide input to the development of submissions or other contributions on child safety related matters.

1.3.2 The Child Safety Steering Committee will include senior staff representing key service streams/support services providing child-related services and the Child Safe Contact Officer. The Child Safety Steering Committee will be chaired by the Group Executive, Family and Disability Services and will meet a minimum of four times a year.

1.3.3 The UnitingCare Child Safe Contact Officer provides a point of contact for issues relating to child safety across the organisation and a direct conduit to and support for the CEO and Board on child safety matters. The role of the Child Safe Contact Officer is included in definitions at Appendix 1.

Rationale

1.3.4 An organisation-wide approach ensures child safety remains high on the agenda, practice learnings can be shared, and an environment of continuous improvement is supported.

Child safe, child friendly - Action 2

Establish the UnitingCare Child Safety Steering Committee.

Child safe, child friendly - Action 1

An organisation-wide communication strategy will be developed so that all staff and volunteers know about the framework. The communication strategy will also ensure that all children and families in contact with our services are able to learn about our approach to child safety and how to report concerns.

Common communication documents will be developed.

2. Our people

We commit to:

- the organisation-wide Code of Conduct for Interactions with Children
- ensuring our people know the standards to which we hold them for their interactions with children and the consequences of any breaches of the framework, Code of Conduct for Interactions with Children, legislation or related policy, procedure or practice
- requiring staff and volunteers to commit to upholding our values and CSCF practice
- having robust recruitment and screening processes to ensure that our people are committed to the safety and wellbeing of children in our care
- supporting our people to make good decisions and providing staff and volunteers with regular training, supervision and ongoing development of CSCF practice
- ensuring staff and volunteers meet record keeping and information sharing responsibilities.

2.1 Recruitment and selection

All positions

- 2.1.1 Recruitment processes will reflect UnitingCare's commitment to child safety in all child-related job advertisements and calls for volunteers, and in all position description documents. The following wording will be included in all position descriptions and the commitment reflected in job advertisements for child-related roles:

UnitingCare is committed to being a Child Safe, Child Friendly organisation and will:

- provide welcoming, safe and nurturing services for children
- implement measures to prevent child abuse and neglect within our services
- appropriately and immediately address child abuse and neglect if it does occur.

Child safe, child friendly - Action 3

Child-related job advertisements and calls for volunteers, and all position descriptions to have the commitment to child safety written into them as they are advertised or the position description reviewed.

Rationale

- 2.1.2 This statement demonstrates to all prospective staff and volunteers that UnitingCare takes the safety of children seriously and as a high priority.

Child-related employment

- 2.1.3 Where recruitment is for a child-related role, selection and screening processes must include scrutiny of complete work history, criminal history checks, reference checks and exploring a person's values, motivation and suitability for working with children. People and Culture will develop an organisation-wide procedure including processes to ensure that staff responsible for recruitment and selection into child-related roles are appropriately skilled. We will ensure guidance on a rigorous process, including interview questions for exploring the values and motivations of applicants seeking to work with children is available.
- 2.1.4 If any concerns arise during the recruitment and screening process about a person's suitability to work with children, there should be discussions with relevant managers and People and Culture. If there is any doubt about a person's suitability to work with children they must not be engaged.

Rationale

- 2.1.5 Exploring a person's work history and motivation for working with children helps to identify a prospective employee's values, professional boundaries and approach to the safety of children, which may highlight issues of concern or inconsistencies with the organisation's values.

Child safe, child friendly - Action 4

Robust recruitment processes must be implemented for recruitment to child-related positions in accordance with the matters outlined above.

2.2 Screening

- 2.2.1 Screening must include:

- Working with Children Check required by legislation (Blue Card in Queensland/Ochre Card in Northern Territory)
- Other screening and criminal history checks (including overseas checks) assessed as necessary
- For persons who have worked overseas in a child-related role, the applicant must be asked to sign a statutory declaration that they have not been involved in activity overseas that would, if committed in Queensland/Northern Territory, disqualify them from applying for a Blue Card/Ochre Card.

- 2.2.2 If there is doubt about whether a Working with Children Check (Blue Card in Queensland/Ochre Card in Northern Territory), or other criminal history check is required advice should be obtained from People and Culture, the Child Safe Contact Officer or the relevant state/territory government agency. A table providing guidance about when a Working with Children Check is required is at Appendix 2.

- 2.2.3 A Working with Children Check only takes into account matters on a criminal history that are relevant to the care of children. Therefore it should not be seen as a substitute for a broader criminal history check where other criminal matters may be relevant to the position.
- 2.2.4 A Working with Children Check is only one tool for screening the suitability for people to work with children. It is not of itself, any guarantee of ongoing suitability and must be coupled with ongoing CSCF risk exposure assessment and child safe practice.
- 2.2.5 Through CSCF risk exposure assessment, consideration must be given to the need to screen contractors, third party providers, students, researchers and anyone else who may come into contact with children in our services, or have access to information about children including client records. Risk mitigation strategies will be put in place accordingly. For example, supervising tradespeople or students on site.

Our staff know the standards to which we hold them for their interactions with children and the consequences of any breaches – not knowing is not an excuse

2.2.6 People and Culture must maintain a central register of all child-related positions and will ensure a Working with Children Check (or exemption) or other child-related screening check (e.g. Child Safety and Personal History Screening for Licensed Care Services) is reflected as an attribute against all positions that require a Working with Children Check or other relevant screening check. The register must include details about each person who is required to have a valid Working with Children Check (or exemption) or any other child-related screening check and whether an application has been made for each check, if a positive notice has been issued, and the date of expiry of the notice.

2.2.7 Business units/functions must ensure child-related position descriptions clearly state that a Working with Children Check (or exemption) or other child-related screening check (e.g. Child Safety and Personal History Screening for Licensed Care Services) is required.

2.2.8 People and Culture will undertake an annual audit of registers. The results will be reported to the CEO and Board.

2.2.9 Business units/functions must be familiar with legislative requirements and implement procedures regarding:

- advice of change in police information;
- who may commence duties pending the outcome of a Working with Children Check and the appropriate level of supervision required to meet government standards and prioritise the safety of children while the check is pending;
- transferring from another organisation;
- changing from volunteer to paid status;
- ceasing employment; and
- any other legislative obligations.

Rationale

2.2.10 Legislative requirements must be met so that persons can have their suitability for working with children assessed. Ensuring that information is up to date and regularly monitored gives the organisation oversight on its legislative compliance and the ability to respond appropriately and quickly where there is a change in a person's information that affects their suitability for working with children.



Child safe, child friendly - Action 5

People and Culture must maintain a central register of all child-related positions and will ensure a Working with Children Check (or exemption) or other child-related screening check (e.g. Child Safety and Personal History Screening for Licensed Care Services) is reflected as an attribute against all positions that require a Working with Children Check or other relevant screening check (for example, management).

The register must include details about each person who is required to have a valid Working with Children Check (or exemption) or any other child-related screening check and whether an application has been made for each check, if a positive notice has been issued, and the date of expiry of the notice.

Child safe, child friendly - Action 6

Service streams/support services must ensure child-related position descriptions clearly state that a Working with Children Check (or exemption) or other child-related screening check (e.g. Child Safety and Personal History Screening for Licensed Care Services) is required.

Child safe, child friendly - Action 7

People and Culture must audit registers annually.

Child safe, child friendly - Action 8

Service streams/support services must implement processes regarding:

- advice of change in police information
- who may commence duties pending the outcome of a Working with Children Check and the appropriate level of supervision required to meet government standards and prioritise the safety of children while the check is pending
- transferring from another organisation
- changing from volunteer to paid status;
- ceasing employment; and
- any other legislative obligations.

2.3 Code of Conduct for Interactions with Children

- 2.3.1 The UnitingCare Code of Conduct for Interactions with Children applies across the whole organisation (Appendix 3). The UnitingCare Code of Conduct must reference the Code of Conduct for Interactions with Children.
- 2.3.2 In accordance with identified risk as determined within each business units/ functions:
- staff and volunteers receive an orientation, including familiarisation with this framework as implemented by business units/functions, the Code of Conduct for Interactions with Children and familiarisation with policies, procedures and practices related to working with children
 - staff and volunteers to agree in writing to uphold the commitments and actions in this framework as a condition of commencing and continuing engagement with UnitingCare set out in the Employee/ Volunteer Commitment to Child Safety
 - refresher training on the Code of Conduct for Interactions with Children to be undertaken at least annually.

A register of all training completed must be maintained.

Rationale

- 2.3.3 The organisation is required by legislation to have a Code of Conduct for Interactions with Children. The UnitingCare Code of Conduct for interactions with children sets out clear expectations of behaviour.
- 2.3.4 Staff and volunteers are aware from the outset of the importance of child safety to UnitingCare.

2.4 Good decision-making – training and supervision

- 2.4.1 All staff and volunteers in child-related roles will be provided with training in child safety at least annually. Refresher training on the framework and Code of Conduct for Interactions with Children must also be undertaken annually by those in child-related roles. Other staff and volunteers will be required to undertake training if CSCF risk exposure assessment for the service or role demonstrates need.
- 2.4.2 As well as highlighting our commitment to child safety, training and supervision needs to take into account different service contexts and roles and responsibilities of staff and volunteers. As people are promoted or roles evolve and people take on new tasks, training and supervision needs to take into account increased levels of responsibility and contact with children, the need for deeper understanding of policy, procedure and practice, and the need to lead by example in upholding values and demonstrating child safe, child friendly practice.
- 2.4.3 Considering individual child-related roles, staff and volunteers will receive training based on contemporary best practice about:
- this framework
 - the Code of Conduct for Interactions with Children
 - child safety
 - signs of abuse and neglect and understanding the complexity of abuse
 - dealing with disclosures and barriers to disclosure
 - behaviour that may indicate grooming

- CSCF risk exposure assessment including how to identify environmental risk and implement environmental safety strategies (including physical and cultural environments)
- the needs of children from diverse backgrounds and circumstances.

Information is provided at Appendices 4-6.

- 2.4.4 Considering individual roles, professional requirements and the service context, supervision will be provided to ensure staff receive appropriate support including the opportunity to reflect on child safe practice.
- 2.4.5 Registers of training must be maintained by service streams/support services.

Rationale

- 2.4.6 Annual training ensures child safety remains a high priority for the organisation and that staff and volunteers are reminded regularly about the need to take an individual and collective responsibility approach to the safety of children in contact with our organisation.

- 2.4.7 Training needs increase and become more specific as people in child-related roles deal with risks specific to their service so training needs will be individually tailored to the service to address risk.
- 2.4.8 Understanding behaviours related to grooming, signs of abuse and the complexity of abuse is critical in providing a child safe environment. In a culture of individual and collective responsibility being aware of concerning behaviour and reporting it appropriately reduces the risk to child safety. Knowing how to deal effectively with disclosures is also essential.
- 2.4.9 Providing supervision to people in child-related roles enables them to reflect on child safe practice and raise any issues or concerns. It also provides supervisors with the opportunity to monitor child safe practice, attitudes and behaviour of staff/ volunteers over time.

Child safe, child friendly - Action 10

All staff and volunteers in child-related roles will be provided with child safety training on commencement and annually. Refresher training on the framework and Code of Conduct for Interactions with Children must also be provided to staff and volunteers in child-related roles annually. Registers of training must be maintained by business units/functions.

Other staff and volunteers will be required to undertake training if CSCF risk exposure assessment for the service or role demonstrates need.

Child safe, child friendly - Action 11

Considering individual roles, professional requirements and the service context, supervision including the opportunity to reflect on child safe practice will be provided to staff in child-related roles.

Child safe, child friendly - Action 9

In accordance with identified risk, staff and volunteers are to be provided with induction and training on child safety in the organisation and to agree in writing to commit to the safety of children as a condition of commencing and continuing engagement with UnitingCare.

3 Our risk environment

We commit to:

- creating spaces that are welcoming and safe for children and supporting staff and volunteers to provide CSCF services and environments
- undertaking regular CSCF risk exposure assessment and mitigation processes across all services, including consideration of physical and online environments, practice and relationships
- regularly reviewing high risk services/activities
- establishing work practices that encourage people to share experiences and information and learn from each other to promote continuous improvement of prevention activities
- ensuring our people have contemporary, evidence-based knowledge of what constitutes grooming, abuse and neglect, and the signs to be aware of.

3.1 Understanding our risk environment

- 3.1.1 Risks vary across UnitingCare and will be assessed with a focus on identifying, preventing and mitigating risks to children in the context of individual services and sites. Guidance on understanding risk as it applies to child safety is provided at Appendix 7.

Child safe, child friendly - Action 12

All business units/functions are to complete the CSCF risk exposure assessment regarding contact with, and potential risks to children for each service offered by the business units/functions and where necessary, implement risk mitigation strategies:

- within the approved timeframe following any revised version of this framework
- on commencing a new service
- on undertaking a new activity within the service
- on undertaking an unusual or irregular activity within the service (e.g. Bookfest, NAIDOC week events)
- at least annually.

Group Executives must report to the CEO annually to confirm that the CSCF risk exposure assessment has been completed

3.2 CSCF risk exposure assessment and mitigation

- 3.2.1 The CSCF risk exposure assessment process will be completed across all service streams/support services regarding contact with and potential risk to children for each service offered:
- within the time approved by the Executive Leadership Team when the framework is revised
 - on commencing a new service
 - on undertaking a new activity within the service
 - on undertaking an annual, unusual or irregular activity within the service (e.g. Bookfest, NAIDOC week events)
 - at least annually.
- 3.2.2 Group Executives must report to the CEO annually to confirm that the CSCF risk exposure assessment process has been completed.
- 3.2.3 Business units/functions will include child safety risk exposure on risk registers.

- 3.2.4 CSCF risk exposure assessment and mitigation activities must take into account the specific circumstances of contact with children and the goal of service delivery. In working with children in any circumstance we aim to ensure that safe, honest and trusting relationships are formed that model respectful behaviour, informed by each individual child's developmental level.

- 3.2.5 Risk mitigation will take into account:

- the specific context of service delivery
- physical environments
- the nature of interactions between children and adults
- the nature of interactions between children and other children
- the vulnerability of children in each environment
- options to engage with children and their families/carers about child safety and protective factors, and build confidence and self-esteem in vulnerable children.

- 3.2.6 Training will be provided for staff completing the CSCF risk exposure assessment in child-related services and will include how to identify environmental risk and implement environmental risk mitigation strategies.

Rationale

- 3.2.7 Creating an environment where opportunities for abuse are reduced is a key component of keeping children safe.

Child safe, child friendly - Action 13

Service streams/support services will include child safety risk exposure on risk registers.

Child safe, child friendly - Action 14

Training will be provided to staff completing the CSCF risk exposure assessment in child-related services, including how to identify environmental risk and implement environmental risk mitigation strategies.



Reporting

4 Our response

We commit to:

- immediately take steps to prevent known risk to any child
- taking prompt action regarding any disclosures, allegations, suspicions or incidents of child abuse and neglect
- immediately report in accordance with mandatory reporting obligations
- immediately report disclosures, allegations, suspicions or incidents of child abuse and neglect to police, Child Safety and other relevant authorities
- ensuring there is a clear, widely known and consistently applied process for reporting and responding to disclosures, allegations, suspicions or incidents of child abuse and neglect
- supporting those who are committed to child friendly practice
- supporting those who make a report
- communicating information to staff, volunteers, carers, clients and others affected by a report, in conjunction with police and other authorities
- promptly, methodically and appropriately addressing breaches of the framework, Code of Conduct for Interactions with Children, legislation, or related policies, procedures or practice, including through increased training, and disciplinary action if required
- having a clear process for responding to child abuse and neglect in our services and meeting the needs of the child with compassion, respect and justice
- reviewing relevant policies, procedures and practices annually and implementing identified improvements providing review findings to our Board
- reflecting on our practice following incidents of child abuse and neglect and taking a continuous improvement approach to child safety.

4.1 Principles underpinning our response

- 4.1.1 The principles underpinning our response to disclosures, allegations, suspicions or incidents of child abuse and neglect:
- a child making a disclosure is to be believed
 - the safety and wellbeing of any child is paramount
 - UnitingCare will comply with mandatory reporting obligations and immediately report any disclosures, allegations, suspicions or incidents of child abuse and neglect to police, Child Safety or other authorities
 - information shall be treated confidentially to protect the privacy of the child and the forensic integrity of any information
 - despite the above, UnitingCare aims to be transparent and communicate openly with those impacted by a report
 - UnitingCare will cooperate with police, Child Safety and other authorities
 - UnitingCare staff should interact with authorities according to their level of delegation and legislative requirements
 - staff and volunteers are encouraged to report to their line manager within UnitingCare in the first instance to support internal and external responses, information flow and client and staff confidentiality
 - if there is any doubt about whether a matter should be reported, it should be reported
 - UnitingCare will work with family and significant others where appropriate to support a child
 - when responding to children with harmful behaviours we will act in accordance with this framework, and also with a therapeutic approach to assist the child to address the behaviour and its causes
 - the identity of the person making the report must be kept confidential except as required under law or for the organisation to assess the circumstances surrounding the report
 - people making reports are to be supported and protected from recrimination.

4.2 What must be reported?

- 4.2.1 Reporting and responding to disclosures, allegations, suspicions or incidents of abuse and neglect will be undertaken in accordance with this framework and any mandatory reporting obligations. Mandatory reporting obligations will be clearly outlined in business units/functions guidelines or procedures.
- 4.2.2 An employee or volunteer must report the following:
- a disclosure of abuse or neglect made by a child or another person where the abuse or neglect relates to a UnitingCare staff member, volunteer, carer, another client, contractor, consultant or researcher
 - a suspicion or allegation that child abuse or neglect is occurring or a child's safety is at risk from a UnitingCare staff member, volunteer, carer, another client, contractor, consultant or researcher
 - a suspicion or allegation that a UnitingCare staff member, volunteer, carer, another client, contractor, consultant or researcher is engaging in behaviour associated with grooming
 - A suspicion or allegation that a UnitingCare staff member, volunteer, carer, another client, contractor, consultant, researcher or any adult associated with the institution, conducts targeted behaviour that ignores or hides the sexual abuse of children (see Appendix 6)
 - any suspected or actual breach of this framework, Code of Conduct/Statement of Commitment, legislation, or related policy, procedure, practice or risk mitigation strategy related to the safety of children.
- 4.2.3 Proof or reasonable suspicion that abuse is occurring is not required. A concern or feeling about a person's behaviour or situation should be reported.
- 4.2.4 If there is any doubt about whether a matter should be reported, the staff member or volunteer should discuss the matter with their supervisor or another manager. If there is any doubt, the matter should be reported.

- 4.2.5 Where a report involves allegations of a criminal offence, UnitingCare will encourage the child/child's family to report the matter to police.
- 4.2.6 Where the child/child's family does not report the matter to police, UnitingCare will report the complaint to police, de-identifying information where possible. This is to ensure that any current risk of harm to children or others can be addressed by the police. In some cases, UnitingCare may also have mandatory reporting obligations to report to the relevant authority.
- 4.2.7 Where a report involves a child who no longer receives services from UnitingCare and the person about whom the report is made is no longer employed by, or associated with UnitingCare, the Complaints of Past Child Abuse or Neglect Policy and Procedure will apply.

Rationale

- 4.2.8 Reporting all disclosures, allegations or suspicions ensures that each report is fully considered and the appropriate action is taken in response to each report.

4.3 Who to report to?

- 4.3.1 Group Executives must ensure that processes are in place to enable appropriately skilled staff to receive and action reports under this framework.
- 4.3.2 Reports may be made by anyone to a supervisor, manager, Group Executive, Director of Mission, or the Child Safe Contact Officer at ucareqld@stoline.com.au or 1800 297 745.
- 4.3.3 A report can be made anonymously to UnitingCare's Child Safe Contact Officer via the child safe telephone line, 1800 297 745.
- 4.3.4 The responsible Group Executive must be made aware of the following as soon as possible and within 24 hours of initial report:

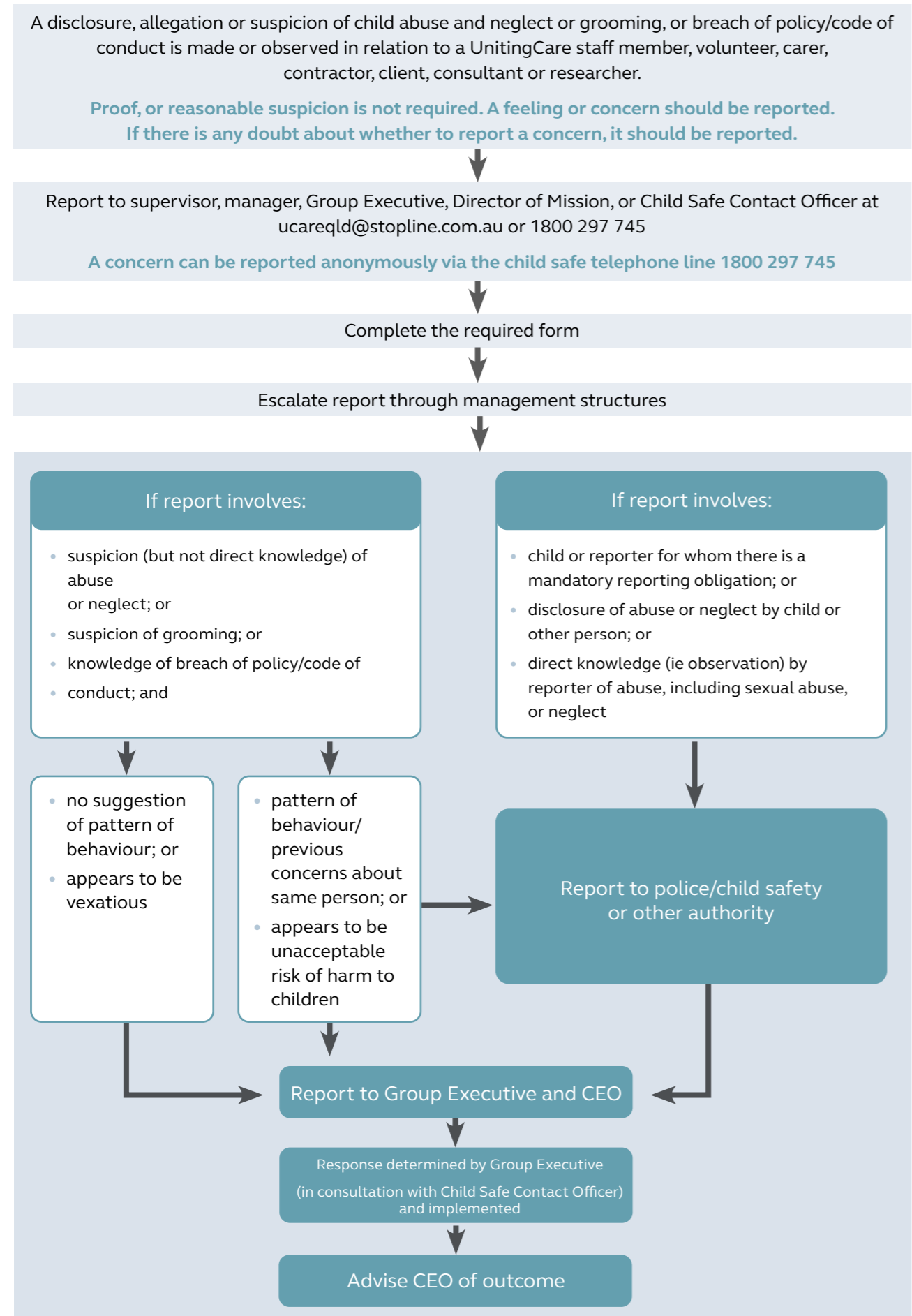
- reports of child abuse and neglect, or behaviours which could suggest grooming, which implicate any employee, volunteer, contractor, foster or kinship carer, another client, consultant or researcher.
- incidents of child abuse and neglect resulting in urgent intervention by emergency services
- indications of systemic failings in the management of incidents relating to the safety of a child.

4.4 How must reports be made?

- 4.4.1 Any concern raised with a supervisor, manager, Group Executive, Director of Mission, Child Safe Contact Officer, or via the child safe telephone line either written or oral, must be actioned under this framework. No matter should be treated as being raised 'informally' and therefore not actioned.
- 4.4.2 A decision-making process to assist staff to determine the action to take is set out in the reporting flow chart below. If there is any doubt about whether to report to police, Child Safety or any other agency, the matter should be reported.

- 4.4.3 The report must be documented in the required form as soon as practicable and escalated through management structures to the Group Executive.
- 4.4.4 The Group Executive must:
- advise the CEO in writing of all matters reported within 24 hours of becoming aware of the report (i.e. what has happened and what is being done in response)
 - provide the CEO with updates as necessary, or as requested by the CEO
 - provide the CEO with details of the response and outcomes at the conclusion of the investigation/review of each report, including any systemic, practice, policy or procedural issues identified for improvement.
- 4.4.5 All reports will be held by the Office of the CEO where they will be reviewed to identify systemic issues or patterns of behaviour relating to any individual. This may include repeated breaches of policy and procedure or engagement in low level behaviours of concern which could be indicative of grooming. Identified patterns of behaviour will be actioned.

Reporting flow chart



4.5 Responding to reports

4.5.1 The Group Executive, in consultation with the Child Safe Contact Officer if necessary, will determine the appropriate action to take in response to a report, including ensuring that immediate safety concerns and any possible risk to children are addressed, and mandatory reporting requirements and public accountability issues have been met.

4.5.2 In responding to the report, proper consideration must be given to:

- documenting all decision-making related to a specific report, including action taken
- conducting an internal review commensurate with the significance of the report to identify any systemic issues, practice issues or risk mitigation strategies that need to be addressed. This can be done simultaneously with any police or Child Safety investigation provided it does not compromise the external investigation (there should be close liaison with police and Child Safety on this matter).
- providing feedback to the reporter.

4.6 Action following a report

4.6.1 The following must occur after a report has been made or pattern of behaviour identified where the person who is the subject of the concern is:

- a staff member or volunteer - the Group Executive and Child Safe Contact Officer if necessary, will determine the appropriate immediate action and ongoing management, pending police or other investigation. The safety of the child and compliance with legal obligations are paramount in determining this response. These actions are to be documented and communicated to those who are required to know in order to monitor compliance with any conditions. There must be ongoing monitoring

of compliance with any conditions.

- a foster or kinship carer or member or associate of the carer's household - the relevant government department will determine the appropriate immediate action.
- receiving an out-of-home care service - the relevant government department will determine the appropriate immediate action.
- a client receiving any other service - the relevant Group Executive will determine the appropriate immediate action.
- another child - the relevant Group Executive will determine the appropriate immediate action.

4.6.2 The immediate response in the workplace must be determined in conjunction with relevant managers, including offering professional counselling.

4.6.3 The child and the child's family are to be provided with information and support throughout the process, including offering professional counselling.

4.6.4 UnitingCare will proactively identify other children who may have been exposed to abuse or neglect and will communicate with children, families and other staff, volunteers and carers, in conjunction with advice from investigating police about the matter and its follow up.

4.6.5 Where action has been taken to remove a person from child-related employment following a report of concern, references must not be provided which indicate support for that type of employment. Any subsequent request for a reference should be referred to People and Culture.

4.7 Insurance

4.7.1 All matters are to be reported to the Uniting Church in Australia, Queensland Synod in accordance with direction from the Queensland Synod team responsible for risk and insurance.

4.8 Gathering and keeping information

4.8.1 Measures to ensure that information is kept confidential must be taken, in order to protect the privacy of the child and the integrity of any potential police investigation. Due to the specialist nature of interviewing children for forensic purposes, generally, after the initial disclosure, the child should not be interviewed unless advice is first sought from police or Child Safety. However, if further information is required from the child, open questions should be asked, answers documented and the child's safety and wellbeing addressed during the information gathering process.

4.8.2 The person who is the subject of the concern should not generally be interviewed about the behaviour until a decision is made about how the matter will be handled and, if the matter is reported to police or Child Safety, only in consultation with police or Child Safety. People and Culture must be consulted to ensure employment law obligations are met.

4.8.3 All information related to the report must be held by the service stream/support service in a central repository which is only accessible to authorised persons. All records and documents relating to a matter must be kept for 120 years from the birth date of the child who is the subject of the concern.

4.9 Annual review

4.9.1 This framework and all associated policies and procedures will be reviewed annually as directed by the CEO. Organisation-wide consultation will be undertaken and input welcomed from persons who have been involved in the operation of the framework. The results of the review will be reported to the Board.

4.10 Reporting to the Board

4.10.1 The CEO will provide a monthly report to the Board (or its nominated committee/s) on reports to the CEO. The Board may determine to refer specific matters to Board committees tasked with risk management and/or service quality.

4.10.2 The CEO may determine that urgency warrants reporting on a specific matter to the Chair of the Board out of session.

Child safe, child friendly - Action 15

Group Executives are responsible for ensuring that processes are in place to address the matters above.

Child safe, child friendly - Action 16

This framework and all associated policies and procedures will be reviewed annually as directed by the CEO.



Appendices

Appendix 1

Definitions

General definitions

Allegation

A claim or assertion, without definitive proof, that a wrongdoing (i.e. abuse or grooming of a child) has happened or is likely to happen.

Child-related role/employment/positions

Includes those roles identified as child-related in accordance with legislation governing working with children checks, as well as any additional positions identified through CSCF risk exposure assessment as having more than indirect contact with children and where contact is of such frequency to allow relationships to develop.

UnitingCare Child Safe Contact Officer

An officer shall be appointed to support the CEO in governance matters related to child safety. The officer will have knowledge or experience in child safety, human resources or complaints handling and an understanding of the work of UnitingCare. For this framework, this includes:

- receiving reports on any child safety concerns from any person who wishes to make a report
- supporting the CEO to develop reports to the Board or its nominated committees regarding child safety
- liaising with service streams/support services in relation to specific reports made under this framework
- providing feedback to Group Executives, CEO and Board on child safe practice within UCQ and opportunities for systemic improvement
- assisting the CEO to undertake an annual review of this framework
- undertaking tasks identified in the Complaints of Past Child Abuse or Neglect Policy and Procedures
- other tasks as requested by the CEO.

Disclosure

When someone, including a child, tells another person about child abuse that has happened or is likely to happen.

Appendix 2

When is a working with children check required?

In Queensland and the Northern Territory employees and volunteers who work with children must undertake a Working with Children Check (Blue Card in Queensland/Ochre Card in Northern Territory).

Role type	Working with Children Check required
Legislation requires a Working with Children Check (In Queensland and the Northern Territory employees and volunteers who work with children must undertake a Working with Children Check – see relevant state/territory government agency website for further information)	✓
Accreditation requires a Working with Children Check	✓
Funding requires a Working with Children Check	✓
Role involves child-related work	✓
Role includes decision-making about policies and procedures concerning children and/or responding to reports relating to child safety (e.g. board and executive roles)	✓ (This is a general indication and the manager of each service will determine when undertaking CSCF risk exposure assessment whether a role requires a Working With Children Check)
Role involves dealing with personal or sensitive information about children (examples include client file, information related to a report of harm or suspicion of harm, any record including name and address or other details that could enable contact with a child outside of work role) (e.g. support services staff including people and culture staff investigating a report of harm or suspected harm, or auditors reviewing service documentation and records for compliance)	✓ (This is a general indication and the manager of each service will determine when undertaking CSCF risk exposure assessment whether a role requires a Working With Children Check)
Contact with children is indirect (not main function of role) (e.g. Lifeline retail store staff where children come into the store to shop, Blue Care staff where children visit customers receiving UnitingCare services)	X (This is a general indication and the manager of each service will determine when undertaking CSCF risk exposure assessment whether a role requires a Working With Children Check)
Role involves periodically attending UnitingCare sites where child-related work occurs (e.g. support services staff including auditors, finance or digital and technology staff attending a childcare centre to undertake a task related to their role)	X (This is a general indication and the manager of each service will determine when undertaking CSCF risk exposure assessment whether a role requires a Working With Children Check)
Role involves no contact with children, no decision-making in relation to children and no access to personal or sensitive information about children	X

If advice is required about whether a Working with Children Check should be undertaken contact People and Culture, the Child Safe Contact Officer or the relevant state/territory government agency.

Appendix 3

Code of conduct for interactions with children

This document outlines standards of behaviour for adults associated with UnitingCare in their interactions with children. It applies to staff and volunteers.

This Code of Conduct ensures that standards of behaviour around children are clear and unambiguous so that UnitingCare can operate as a child safe child friendly organisation.

Underpinning values

It is expected that all staff and volunteers will uphold the values of UnitingCare and will care for and prioritise the safety of children who they come into contact with through UnitingCare.

Compassion: We will deal with children compassionately and will understand their vulnerabilities

Respect: We respect the boundaries of professional relationships and respect the rights of every person to feel safe while in contact with our services

Justice: We will seek justice for those who have been harmed

Working Together: We will work together to create a culture of individual and collective responsibility for the safety and wellbeing of children and to create friendly, welcoming spaces for children

Leading through Learning: We will be leaders by undertaking a continuous improvement approach to the safety of children

Specific behaviours

Specifically, staff and volunteers **must:**

- maintain respectful, professional and ethical relationships with children
- appropriately respect children's privacy and the privacy of their information
- familiarise themselves with and uphold the UnitingCare Child Safe, Child Friendly Risk Management Framework as implemented in business unit/function procedures and processes
- uphold legislative obligations, including mandatory reporting obligations where they exist, and fulfilling obligations regarding Working with Children Checks (Blue Card in Queensland/Ochre Card in Northern Territory)
- report any breaches of this Code of Conduct or the UnitingCare Child Safe, Child Friendly Risk Management Framework, legislation or related policy, procedure or practice as soon as possible
- follow policies, procedures and practices that apply specifically to their work
- ensure that any physical touching of a child is only to the extent necessary to provide for the care of the child and must be appropriate for the age, maturity, health and other needs of the child
- use appropriate language around children
- provide for the needs of life for children in our care
- provide a nurturing environment for children in our care.

Staff and volunteers **must not**:

- abuse or neglect any child
- seek to touch or use a child in any way to meet the needs of the adult
- use degrading or abusive language toward, or in the presence of a child
- be inconsistent in dealing with different children for example, not bestow special gifts and favours, show favouritism, or encourage development of special relationships with individual children
- maintain relationships with children, or their families, outside of the work context, including through social or electronic media, take a child to his or her home, or encourage meetings outside of the UnitingCare working context. Where a person has a pre-existing relationship with a child, they must advise their manager of this
- spend time inappropriately alone with a child
- inappropriately photograph children
- engage in a sexual relationship or sexual interactions with a child or expose children, by any means whatsoever, to sexual situations for example, sexual comments, sexual jokes, sexual acts, undressing in front of children, showing pornography to children, sexual gestures, failing to afford children appropriate privacy when they are undressing, showering or toileting
- be under the influence of drugs or alcohol while at work
- supply cigarettes, drugs or alcohol to a child
- engage in 'grooming' behaviour
- engage in any other behaviour which the broader community would consider to be inappropriate or inconsistent with community standards for the proper treatment of children.

Breach of the code

All staff and volunteers must comply with this Code of Conduct. Failure to comply can lead to disciplinary and other action, including termination of employment/services.

All staff and volunteers are expected to report breaches of the Code of Conduct – no matter how seemingly insignificant - in accordance with the reporting procedure in the UnitingCare Child Safe, Child Friendly Risk Management Framework as implemented in business unit/function procedures and processes.

Clarification of the code

Clarification of this Code of Conduct can be sought from a more senior staff member, or by contacting the UnitingCare Child Safe Contact Officer at ucareqld@stoline.com.au or 1800 297 745.

Review of the code

This Code of Conduct will be reviewed annually in accordance with the UnitingCare Child Safe, Child Friendly Risk Management Framework.

Appendix 4: Safety

The signs of abuse and neglect

Why does abuse occur?

The reasons that child abuse occurs are complex and there is considerable diversity in the characteristics of perpetrators of institutional child sexual abuse. The multifaceted nature of child abuse means there are many aspects to consider when thinking about prevention. This is why strategies must be designed to identify and mitigate the risks that are specific to a service or site, taking into account the adults and children present, and the physical environment.

Child abuse is usually perpetrated by a person who is known to the child. In an organisation providing services to children, a potential abuser is more likely to be a staff member or volunteer - an ordinary person, who is liked by colleagues - than a stranger.

This creates complexity when grooming and signs of abuse are considered in the work environment and is why any behaviour that is in breach of policies, or causes concern must be reported.

Why are some children more vulnerable and at increased risk of sexual abuse?

Research has identified factors that increase a child's vulnerability. These factors include:

- the gender of the child
- the age and developmental stage of the child
- whether the child has experienced maltreatment previously
- whether the child has a disability, and the nature of that disability
- the family characteristics and circumstances of the child
- the nature of the child's involvement in institutional settings
- other factors including the child's physical characteristics, social isolation, high achievement, lack of understanding of sexual behaviour (including sexual abuse) and personal safety, sexual orientation, and lack of self-esteem.

(Royal Commission Final Report: Nature and Cause, Volume 2, p182)

What is child abuse (information based on Child Safety website)

Physical Abuse

Physical abuse occurs when a child has suffered, or is at risk of suffering, non-accidental physical trauma or injury. Physical abuse can include:

- hitting
- shaking
- throwing
- burning
- biting
- poisoning.

Physical abuse does not always leave visible marks or injuries. It is not how bad the mark or injury is, but rather the act itself that causes injury or trauma to the child.

Sexual abuse

Sexual abuse occurs when an adult, child or adolescent uses their power or authority to involve a child in sexual activity.

Sexual abuse can be physical, verbal or emotional and can include:

- kissing or holding a child in a sexual manner
- exposing a sexual body part to a child
- having sexual relations with a child
- talking in a sexually explicit way
- making obscene phone calls or remarks to a child
- sending obscene mobile text messages, videos or email to a child
- fondling a child in a sexual manner
- persistently intruding on a child's privacy
- showing pornographic files, magazines or photographs to a child
- having a child pose or perform in a sexual manner
- forcing a child to watch a sexual act.

Emotional Abuse

Emotional abuse occurs when a child's social, emotional, cognitive or intellectual development is impaired or threatened. It can include emotional deprivation due to persistent:

- rejection
- hostility
- teasing/bullying
- yelling
- criticism
- exposure of a child to domestic and family violence.

Neglect

Neglect occurs when a child's basic necessities of life are not met, and their health and development are affected.

What are the signs of abuse or neglect?

Signs that abuse is occurring could be very subtle. Understanding the nature of abuse and neglect, and the behaviours of abusers can assist in preventing or detecting abusive behaviour.

Many small signs might be observed which could appear to be insignificant or ambiguous, however, when examined together they may demonstrate a pattern of behaviour that is indicative of abuse. This is why reporting any breaches of the framework is critical.

Signs of abuse may include:

- unusually demanding or aggressive behaviour
- rocking, sucking or biting excessively
- bedwetting or soiling
- showing wariness and distrust of adults
- inappropriate sexualised behaviour
- sudden withdrawal or overly obedient behaviour
- being unusually frightened or worried
- not wanting to spend time with a person where this seems outside of the child's normal behaviour or where the child seems fearful or anxious

- unexplained bruises, burns or injuries in different stages of healing
- being unable to explain an injury, or providing explanations that are inconsistent, vague or unbelievable
- sleeping difficulties, often being tired and falling asleep
- feeling suicidal or attempting suicide
- low self esteem
- having difficulty concentrating
- abusing alcohol or drugs
- a feeling that "something isn't right".

Disclosure of abuse, even at a very low level, may be a sign that greater abuse is occurring and the child is 'testing' what might happen if they make a full disclosure.

Signs of neglect may include:

- frequent hunger, malnutrition, stealing or hoarding food
- lack of cleanliness that is ongoing and not consistent with the daily dirt accumulated by active children, including poor hygiene, matted hair or dirty skin
- unwashed clothes
- unattended physical or medical problems
- being constantly tired
- inappropriate clothing, especially inadequate clothing in winter
- frequent illness, infections or sores
- being left unsupervised, or inadequately supervised, for long periods.

A suspicion of abuse or neglect may be based on a direct observation of inappropriate behaviour or observations of minor incidents or signs of abuse which create a feeling of unease about an individual or situation. Such cases should be reported in accordance with this framework and related procedures and processes. Advice can be sought from supervisors, managers, Child Safe Contact Officer at ucareqld@stopline.com.au or via the child safe telephone line 1800 297 745.

The complexity of abuse

The nature of abuse and neglect is complex and sensitive. The child may be fearful that they will not be believed, that they, or someone they care about, will be hurt as retribution for the disclosure or that they have done something wrong. There are also complex legal and practical issues that could be involved, such as impacting on the child's accommodation or contact with siblings and parents.

Trusted adults must pay attention to what a child says, and also what a child does not say. For example, a child may say that they do not want to be near a particular carer. This could be indicative of the child feeling unsafe but the child might not wish to provide any further detail.

A child may indirectly disclose through drawings or play, or may make ambiguous statements to try to alert adults around them to the fact they are being abused.

If a child makes a disclosure, recipients of the information should be mindful of the need:

- for the child to be believed and for their safety to be prioritised
- to ask open and not leading questions, for example, "What happened next?", instead of "Did he touch your penis?"
- to document the disclosure as soon as possible, using the words of the child where possible
- to follow reporting procedures
- to involve police and other relevant authorities as soon as possible.

There are many barriers to reporting abuse, with many people disclosing childhood abuse years later. There are additional barriers for some children, for example, children with a disability may have trouble communicating, Aboriginal and Torres Strait Islander children may fear community retribution and shame on the victim and perpetrator and be reluctant to involve police and authorities.

Children should be empowered by raising awareness of what abuse is and how they can get help and be supported by a culture of belief.

Appendix 5

What is grooming?

Grooming is actions by an adult, adolescent or child to develop opportunities to sexually offend against a child.

Grooming is generally subtle, ambiguous and is usually clearly seen in hindsight. This is why it is important that any breach of policy or generalised concern is reported – this will allow for seemingly minor matters to be linked to identify a pattern of behaviour which may lead to abuse being prevented or detected early.

While there is no typical victim profile, vulnerable or lonely children may be targeted. Behaviours to be aware of include establishing a relationship to fill an emotional need, taking a special interest in a child, or providing support for a family with offers to babysit.

People do not need to make a judgment about behaviour they are observing. They do not need to have proof of abuse. Grooming is by nature ambiguous and UnitingCare aims to create a culture where it is safe for people to take action wherever they have a concern.

The following list is not exhaustive and the matters are not necessarily indicative that grooming is occurring. However, grooming may involve a person:

- positioning themselves in an environment where there is access to children such as a sporting or community organisation
- developing relationships with a child, their family and sometimes within the organisation to gain trust from the community and individuals

- spending time with the child away from protective adults, for example, offering to babysit or take the child on special outings
- engaging inappropriately with the child on social media
- showing favouritism towards a child by giving gifts or money, or for older children, alcohol, cigarettes or drugs
- sharing secrets with the child
- allowing the child to break rules
- non-sexual touching of the child such as tickling, hugging, sitting on laps, rough play
- taking photos of a child outside of official duties
- declarations of love for the child (to the child or to others).

These actions establish an emotional and physical connection which then allows escalation of behaviour to increase sexual elements, such as:

- interrupting a child while bathing or changing
- washing a child or allowing the child to be present while the adult is bathing or naked
- inappropriately talking about sex with the child
- ‘accidental’ intimate touching
- taking an inappropriate interest in the child’s sexual development or knowledge
- exposing the child to pornography or sexual jokes
- sexual touching, sexual assault
- threats or rewards for keeping the abuse a secret – often the existence of the relationship between parents and the abuser or co-workers and the abuser means that the child is less likely to report.

Appendix 6

Laws targeting sexual offences against children

Overview

On 5 July 2021 the Criminal Code was strengthened to increase protection of children from the risk of sexual abuse and target behaviour that ignores or hides the sexual abuse of children. This means that:

- All adults must report sexual offending against children to the police unless they have a reasonable excuse (section 229BC of the Queensland Criminal Code); and
- Adults working in an institutional setting must protect children from the risk of a sexual offence being committed against them (section 229BB of the Queensland Criminal Code).

Failure to report offence

- If an adult reasonably believes (or should reasonably believe) that a child is being or has been the victim of sexual abuse by another adult, they must report it to the police as soon as reasonably practicable after the belief has (or ought to have) been formed – unless they have a reasonable excuse. This law applies to all adults over the age of 18 years.
- NB: Historical Offences – If you receive information that makes you reasonably believe a sexual offence has been committed against a child and you do not have a reasonable excuse then you must report it even if it occurred a long time ago.

Failing to protect children from sexual offences

An accountable person (including a Leader or Manager) who fails to protect children from sexual offenders in an institutional setting has committed an offence.

The Failure to Protect offence applies if you are 18 years or older and associated with an institution that has children in its care, supervision or control and you:

- Know there is a significant risk that another adult also associated with the institution will commit a sexual offence against a child or children;

- Have the power or responsibility to reduce or remove the risk; and
- Wilfully or negligently fail to reduce or remove the risk.

Definitions

Child – these laws apply in respect of a child is a person under 16 years or a person under 18 years who has an impairment of mind.

Impairment of Mind – means a disability due to an intellectual, psychiatric, cognitive or neurological impairment (or a combination of these), which leaves the person with both:

- A substantial reduction in their capacity for communication, social interaction or learning AND
- A need for support.

Institution – provides services to children or operates a facility for (or engages in activities with) children under the entity’s care, supervision or control. This will include:

- Schools
- Religious organisations
- Hospitals
- Child Care Centres
- Licensed residential facilities
- Children’s counselling and support services

Accountable person – an adult who is associated with the institution. For example:

- Involved in the management and control of the service
- Are employed or contracted by the institution
- Volunteer for the institution
- Engage in an activity with the institution that requires a blue card or an exemption notice
- Deliver a service to a child who is under the care, supervision or control of the institution
- Foster and Kinship Carers supported by the institution.

Child Sexual Offence – is an offence of a sexual nature committed against a child and includes:

- Indecent treatment of a child
- Carnal knowledge with or of a child
- Rape

- Incest
- Grooming a child (or their parent or carer) including online
- Making child exploitation material
- Maintaining a sexual relationship with a child

Reasonable Belief – is a belief that a reasonable person would form in the same position and with the same information. For example, a reasonable belief could be formed if:

- A child states they have been sexually abused; or
- A child has signs of sexual abuse

Reasonable Excuse – A reasonable excuse may include but is not limited to the following:

- You have already reported the offence to the Department of Children or you know another person has or will report it. For example, you are a frontline worker and your Leader has reported the offence due to other laws or policies. You have a responsibility to ensure your leader has reported it.
- You reasonably believe that the information has already been given to a police officer
- You received information after the child victim has become an adult (18 or over) and you reasonably believe that they do not want to reveal it to the police.
- You believe reporting the offence would endanger you or another person (other than the alleged offender) and that failure to give information to police is reasonable.

Practice examples

Scenario 1

You are a Youth Worker at a Residential Out of Home Care Service and Jenna, a 14-year-old female young person tells you that she has been texting with her 18-year-old boyfriend and he has asked her to send him a nude photograph. What should you do?

- You must report this information to the police. Talk to your Manager about how to do this.
- The 18-year-old, as an adult, may have committed an offence of making child exploitation material or indecently treating the child. Failure to report it may be an offence

Scenario 2

You are a Counsellor with the Family and Relationship Service and a client tells you that they were sexually abused by an uncle when they were 8. The client tells you that they do not want to make a complaint to the police.

As your client is now an adult and you reasonably believe they do not want you to reveal the information to police, you do not have to report the child sexual offence to the police as you have a reasonable excuse. However, before forming this belief you should:

- Advise the client of the law and the requirement to report.
- Specifically ask them whether they want you to report this to the police
- Document their response and discuss with your manager
- Follow all other organisational policies and procedures.

Scenario 3

You are a Caseworker with the IFSS. You are working with a family where there has been domestic and family violence. The mother in the family has told you previously that her partner has forced her to have sex on a number of occasions. Last week the mother has told you that she thinks that her partner may be sexually abusing their 12-year-old daughter. The mother tells you that she has not told anyone else as she is scared of what her partner will do.

What do you do?

- This matter should be reported however you may have a reasonable excuse not to. If you reasonably believe that reporting the offence would endanger you or another person and that failure to give information to police is reasonable.
- You should not make this decision yourself – you must speak to your Manager, the Client Safety Team, Child Safe Principal Practitioner or Practice Improvement Advisor.

Scenario 4

You are a nurse in a busy hospital ward that works with both adults and teenagers. At a recent staff meeting you are informed of the new laws about failing to protect or report sexual harm offences to children. You are considering one your current patients, a 14-year-old girl, with respect to this information. In good faith, your understanding is that as her nurse, in order to ensure you are keeping her safe, these laws mean you will now have to ask her (or any patient) if she has been sexually harmed.

What do you do?

Discuss this concern with your Manager, the Director of Clinical Services or the Child Safe Principal Practitioner as soon as possible.

These laws do not require staff and volunteers of UnitingCare to ask any child or adult if they have experienced sexual harm.

Scenario 5

You are a Supported Living Facilitator who supports a 15-year-old male with day to day living. You notice that one of your co-workers a 30-year-old male is always offering to do overnight shifts

with the young person and you often see him whispering and giggling with the young person. He also spends a lot of time chatting to the young person's mother who has expressed that the co-worker is amazing and is such a great role model to the young person. Recently, you overheard the co-worker talking to the young person about his first sexual experiences and that it was time for the young person to think about how he would like his first experience to go. You know that it is normal for 15-year olds to be thinking about sex a lot and it is important for them to be able to talk to a trusted person about their feelings but you are not sure that this is appropriate. What do you do?

You may be witnessing grooming so it is important that you raise this with your manager or another person as outlined in the Child Safe Child Friendly Framework.

This may need to be reported to the police or child safety as if you fail to raise it further you may have committed an offence in failing to report it.

Remember you do not have to have proof that an offence is being committed to talk to your Manager about this.



Appendix 7

Dealing with disclosures

If the complexities of disclosures are not understood and they are not handled sensitively, children can experience further trauma and the abuse might continue or escalate.

The general principles for dealing with disclosures are:

- disclosures are to be believed
- safety is to be prioritised.

Children may make disclosures in a variety of ways and adults who care for them should be alert to what children are saying. Disclosures can be overt or can be subtle and ambiguous – for example, a child may say they do not want “x” to take them to soccer practice anymore.

Children who make disclosures could be feeling scared, embarrassed, guilty, in pain, worried for the ramifications that may have been threatened by the abuser, worried about getting their abuser into trouble and worried that they will not be believed.

The person to whom the disclosure is made should:

- not make promises to keep the disclosure a secret – rather tell the child that you will help them to get help
- give the child time and space to say what they need to say and ensure you listen and understand correctly
- not ask leading questions
- document the disclosure using the words of the child where possible, as soon as possible following the disclosure

- wherever possible, ensure that staff members of the appropriate gender are involved in taking the disclosure and/or for any follow up with the child
- where appropriate, arrange for the child’s parents to collect the child and inform them about what has happened
- follow the reporting requirements under this framework, including seeking managerial advice if there is uncertainty about whether the disclosure triggers the reporting process under the framework
- encourage and support (but not pressure) a child or parents to report to the police and/or Child Safety
- adults receiving disclosures must act in accordance with legislation, mandatory reporting obligations where they exist, and policy to report appropriately internally and to authorities that have responsibility for investigation and action (police, Child Safety or other agencies)
- offer counselling or information about accessing counselling to the child and parents
- staff, volunteers and carers associated with UnitingCare are not authorised to investigate following a disclosure.

The person receiving the disclosure should be offered counselling through the UnitingCare Employee Assistance Program. This service can be accessed directly by staff and volunteers.

Appendix 8

Understanding risk in our environment

What are the risks?

This framework deals with services where children are the client, through to services with indirect contact with children where services are provided to others. CSCF risk exposure assessment and mitigation must be appropriate to the services being provided and the role of an individual. For example, it may be entirely appropriate for a counsellor to be alone with a child during a counselling session at a residential facility. However, it will not be appropriate for that person to be alone with the child in their room at night with the door closed. It will not be appropriate for a tradesperson at that residential facility to be alone with a child.

In conducting CSCF risk exposure assessment there are some general risks that may apply across services and some that will be specific to the service. General risk factors include, but are not limited to:

- opportunities for unsupervised access to children for example, in a residential environment, transporting children, or in an area of a building that cannot be observed by others
- opportunities to develop a relationship of trust with a child (or persons close to the child) over time
- assisting children with personal care such as toileting, bathing, etc
- where the children have particular vulnerabilities, for example, disabilities
- where there is interaction between children and other children.

Harmful behaviour by other children

While it is common to think about adults being the perpetrators of abuse against children, a child or young person may also use harmful behaviour toward another child or young person. Given the range of services UnitingCare provides it is important to be aware of the potential for harmful behaviour, including sexual abuse, between peers and ensure that CSCF risk exposure assessment and prevention strategies address this risk. In responding to children with harmful behaviour UnitingCare will act in accordance with this framework, but also with a therapeutic approach to assist the child to address the behaviour and its causes.

Environmental risk

Environmental risk is another important consideration when conducting CSCF risk exposure assessment. Physical environmental factors can contribute to the risk of abuse occurring. Physical factors such as enabling natural monitoring and observation, or active supervision may decrease the risk of abuse. Other environmental factors to be aware of include derogatory or sexist material and inappropriate language or clothing.

Addressing risk

Where any risk of abuse to children is identified, a service specific risk mitigation strategy must be put in place.

Risk mitigation strategies may include, but are not limited to:

- considering whether people need to work in pairs or groups or in line of sight of others when around children
- reconfiguring building/furniture layout to remove any secluded areas or ensuring that doors have glass panels and rooms have uncovered windows, as appropriate to service provision
- maintaining policies regarding physical contact with children, contact with children outside of services and mobile phone usage (including for games/apps/internet usage, social media usage in a way that may be bestowing special favours on a child, inappropriate photograph taking, inappropriate telephone/online contact)
- having clear boundaries for overnight stays and sleeping arrangements
- having rules regarding change rooms
- considering how to minimise one-to-one time periods, for example, during transport, around the time of service open and closure, except as necessary to service provision
- developing rules regarding the appropriate behaviour management of children
- having clear rules regarding use, possession or supply of drugs, alcohol or cigarettes
- ensuring that people providing counselling and support services to children are properly debriefed
- ensuring a child's online activity is appropriate to their age, being mindful to the right to privacy and healthy development
- ensuring regular discussion, use and working knowledge of the Child Safe, Child Friendly Risk Management Framework, including the Code of Conduct for Interactions with Children.





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